## \*Men's A/AA/B/BB - Monday Nights \*Women's A/AA - Tuesday Nights

\*Women's B/BB - Thursday Nights

\* Weather Cancellation: Matches will automatically be made up the first available Wed.

## LOWER PAXTON PARKS & RECREATION

5000Commons Drive, Harrisburg, PA 17112 Phone 657-5635

## 2008 Summer League VOLLEYBALL LEAGUE ROSTER & TEAM ENTRY APPLICATION

| Date:       | R or NR |        |   |  |
|-------------|---------|--------|---|--|
| Check #     | _ CC    | C Cash |   |  |
| Men / Women | AA      | A BB   | В |  |
| Number of   |         |        |   |  |

PLEASE CIRCLE ONE: Men AA, Men A, Men BB, Men B, Women AA, Women AB, Women BB, Women B FEE: \$250.00 Resident \$290.00 Non-Resident Return this form with payment to the Recreation Office, Mon. – Fri., April 7 – 18, 2008 between the hours of 8 a.m. - 5 p.m.

| TEAM NAME:        |                                  | SPONSOR   | :             |                                |               | R or NR       |               |
|-------------------|----------------------------------|-----------|---------------|--------------------------------|---------------|---------------|---------------|
| Name (Print/Type) | Address<br>(Street, City, & Zip) | LP<br>Res | USAV<br>REG ? | Telephone<br>(D-Day/E-Evening) | Jersey<br>No. | Shirt<br>Size | Date<br>Added |
| Captain           |                                  |           |               | 1. 2.                          |               |               |               |
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| rimary number to contact in the event of inclement weather or other cancellations. |                     |                 |  |  |  |
|--|---------------------|-----------------|--|--|--|
| Captain  | Captain's Signature | *EMAIL ADDRESS: |  |  |  |

I hereby certify that the above information is correct and that I have read & agree to all the rules & regulations of the Volleyball League. The (#1.) phone number is the

<sup>\*\*</sup>All Players listed must have complete address, jersey & telephone numbers, (X) if Lower Paxton resident & last year of USVA registration, if applicable. Minimum ten (10) players on roster, no maximum.

| Name (Print/Type) | Address<br>(Street, City, & Zip) | LP<br>Res | USAV<br>REG ? | Telephone<br>(D-Day/E-Evening) | Jersey<br>No. | Shirt<br>Size | Date<br>Added |
|-------------------|----------------------------------|-----------|---------------|--------------------------------|---------------|---------------|---------------|
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